STATEMENT OF ORGANIZATION			OFF Report Number:	ICE USE ONLY 11028
Name and Address of Committee		Date of this Statement		/30/2007
LA NURSE PRACITIONERS PAC (NPPA	C)	1/1/200		
1200 South Acadian Thruway Suite 206		3. Estimated Membership		
Baton Rouge, LA 70806-4112			0	
Check If:		4. Amended Statement?		
New Committee		YesX_No		
All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) a. Name				
	Treasurer			
6. Affiliated Organizations (Any organization other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address c. Relationship to Committee				
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market				
mutual funds) a. <u>Name</u> b. <u>Addre</u>	<u>ess</u>			
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one:Principal Campaign CommitteeSubsidiary Committee				
b. Name of Candidate			c. Office Sought by the Candid	late
9. a. Name of Person Preparing Report				
b. Daytime Telephone				
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.				
This 30th day of January	,	<u>7</u> .		
Yolanda Robertson			<u>(225) 763</u>	3-2644
Signature of Committee/Chairperso	on		Daytime Te	
Sophia Burgess				
Signature of Committee Treasurer, if any			Davtime Te	lephone

Form 200, Rev. 12/03